



URBAN DISTRICT OF DISS.

REPORT OF THE MEDICAL OFFICER OF HEALTH and  
REPORT OF THE SANITARY INSPECTOR FOR THE YEAR  
1950.

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PUBLIC HEALTH COMMITTEE 1950.

Chairman:- Councillor J.H.SCOGGINS.

Councillor	C. Denny,	Councillor	Miss Saunders;
"	E.Pursehouse,	"	Mrs. Steggles,
*	" H.C.Whittaker,	"	S. J. Westwood,
≠	" C.E.J.Gaze,	"	D. Jones.

≠ Chairman of Council.

\* Vice-Chairman of Council.

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Mr. Chairman, Ladies and Gentlemen, I have the honour to present my Annual Report for the year 1950, which has been prepared according to the instructions issued by the Minister of Health.

#### Staff.

Dr.W.W.Sinclair relinquished his post as your Medical Officer and was succeeded by Dr.A.E.Brown on the 13th May 1950.

It was the opinion of Dr. Sinclair and one which I now share as the result of my own experience, that the offices of the four Councils comprising "Area 5" are too far apart to permit of your Medical Officer carrying out his duties from them as bases, and I am pleased to record that the Councils concerned have accepted in principle the necessity of centralising as much routine work as possible in one Office.

The County Council have acquiesced in the temporary Local Area Office at Long Stratton being used for this purpose and it is hoped that agreement on clerical assistance etc. will soon be reached.

Your Sanitary Inspector, Mr.L.Wilson, resigned on the 30th November, 1950, and Mr.L.G.Stribley has been appointed in his place and will be taking up his duties on 1st January 1951.

I would here draw the attention of the Council to a resolution passed in 1947 to the effect that while it would send delegates to conferences of associations of which it was itself a member, it would not financially assist its technical officers to attend conferences of their own professional bodies, even though the Minister of Health has sanctioned expenditure for this purpose.

Although technical officers are fully qualified at the time of their appointment, it is in the interest of the public that they should keep abreast of technical developments in their particular field. As far as I can ascertain this principle is accepted and applied by most authorities as it is also by all commercial undertakings of any size. I have in mind the position of your Sanitary Inspector in making these comments and trust you will reconsider the position at a convenient time.

#### Vital Statistics.

Vital statistics are given in detail in the conclusions of the report. The Registrar General estimates the population of your district to be 3,509 which is a small increase on that of previous years.

#### Birth and Death Rates.

There were 51 births in your district in 1950 giving a natural increase of 1. Bearing in mind the increase in population as estimated by the Registrar General it seems, therefore, that some movement of persons into the district has taken place.

The birth rate for 1950 is 14 per 1,000 of the population. Further details and figures for recent years are shown in Table 8.

This rate is still below that for England and Wales and it will be recalled that my predecessor, in his report for 1949, considered the most likely causes of this low rate to be



the ageing population and the acute shortage of houses for young married couples. The former would explain the fact that the crude death rate for Diss (13.7) still exceeds the rate for England and Wales (11.6).

There was only one stillbirth recorded during the year - a satisfactory position.

#### Causes of Death.

Causes and ages of death are shown in Tables 6 and 7. Diseases specifically associated with old age accounted for 62% of the total and deaths from cancer amounted to 14% of all deaths.

#### Infant Death Rate and Maternal Mortality.

There were no deaths of children under one year, neither did any mothers die from causes associated with pregnancy or childbirth. This is a highly satisfactory state of affairs, reflecting credit on all concerned.

#### Infectious Disease, excluding Tuberculosis.

A total of 89 cases of infectious disease were notified during the year and details are given in Tables 10 and 11. The excess, over the very small numbers notified last year (14) is accounted for by the minor outbreak of measles occurring in the early part of the year. There was one death from influenza.

#### Tuberculosis.

Five new cases, two pulmonary and three non-pulmonary, were notified during the year and three were removed from the register as removed from the district, arrested, and as the result of death etc., leaving a total of 23. These are classified as follows:-

Pulmonary, Male	11.	Non-Pulmonary, Male	2.
" Female	7.	" Female	3.

There is reason to believe that these figures may be in excess of the true number of cases and at the time of writing, the register is being brought up to date.

The control of tuberculosis, resting as it does in the hands of three authorities, for each of whom an attempt has been made to give clear-cut functions in dealing with a disease in which it is not practicable to separate such matters as prevention, ascertainment, treatment, after care and social welfare, is highly unsatisfactory.

Judging by the amount that has been written on this subject, difficulties are general throughout the country. Pending action at a National level, however, District Medical Officers in Norfolk have agreed on a uniform method of keeping the Tuberculosis Register and steps are being taken to improve liaison between the Regional Board, the County and yourselves. It is hoped that one outcome of these talks will be that the minimum routine information required by your Medical Officer will be forthcoming.

#### Vaccination.

Since vaccination ceased to be compulsory there has been a falling off in the number of children vaccinated in the country as a whole. This is potentially a serious danger. There are several advantages in carrying out primary vaccination during infancy.

28 infants were vaccinated in 1950, representing 55% of the children born in that year, and although this is 1% lower than the corresponding figure for 1949, it still compares very favourably with other areas.

#### Dental State of the Children.

I am much concerned with the state of the teeth of the children in your district and the fact that the services available to them have steadily dwindled since the coming into force of the National Health Service Act on the 5th July, 1948.

This, in spite of ministerial statements that children and expectant mothers should have priority treatment.

It is common knowledge that anomalies in financial arrangements in the various parts of what is now a State Health Service is at the basis of the present difficulties and while I realise that you are not the authority responsible in this matter, I feel that it is my duty to draw your attention to the position.

I do not think your district is worse off than the majority at the present time, the problem is a national one, but a heavy responsibility rests with those whose task it is to assess a prematurely edentulous population in financial terms. The situation is further aggravated by the fact that a large proportion of the public does not realise the importance of the preservation of their teeth. They all too often regard the dentist only as a man who pulls them out.

This report deals with the position during the year 1950, but I would like to take this opportunity of drawing your attention to the fact that priority classes, i.e., pre-school and school children, pregnant and nursing mothers, are still entitled to completely free services under the Act.

#### Water Supplies.

The main water supplies are derived from a deep bore into the chalk within the district's boundary. This supply has remained satisfactory both in quality and quantity, throughout the year. Three houses have been connected to the main and while there are still a number of shallow wells in the built-up area, I am glad to record the Council's efforts to obtain their replacement by main supplies as far as possible.

#### Drainage and Sewerage.

The position regarding the proposed new sewerage works has progressed on paper, but the practical position is the same as reported by my predecessor. Every effort has been made to render the existing works as efficient as possible - all beds were ploughed during the summer, but the task is quite hopeless. I realise that the Council has done, and is doing, everything possible to bring the new scheme to the stage when it becomes of practical use to the Town and there is no need for me to urge the matter.

Night soil disposal is another problem of which the Council is well aware. Some amelioration and financial saving has been achieved by arranging for the emptying of the larger cesspools by a gully emptier, but the problem of dealing satisfactorily with pail closets remains. Even when the proposed sewerage scheme is completed, it is estimated that 150 pails will have to be emptied and the Council will not wish the present arrangements to continue indefinitely.



## Housing.

Housing is still the most serious problem; 22 Council houses, 6 privately owned houses and 1 flat have been completed in the year under review.

The housing application list was revised in September, 1950, with the result that the number of applicants fell overnight from 335 to 250. Such a sudden diminution in the size of this most important problem requires more examination than the mere acceptance of the new list, based as it is solely on failure of applicants to return a form within 7 days. It is probable that the majority of those whose names have now been removed from the list have made private arrangements for their rehousing, but in the country as a whole, there is no doubt that more families are finding it difficult to "make ends meet". The Council should be aware of applicants who wish their name removed from the list because of changed in their financial position. Quite apart from outright inability to pay the rent of the new houses, there must be some who have only been able to meet it by economising in other necessities. It is known that this happened in rehoused families before the war and largely off-sets the benefit of rehousing. This is a not unlikely problem in this area as many families rehoused have been accustomed to rents less than 30% of those they are now asked to pay. Nor is their added expenditure limited to increased rent. The acquisition of a new Council house tends to lead, as it is intended to lead, to a higher standard of living, but this cannot be achieved or maintained without further expenditure which, with the present economic trend, is likely to be more than many family budgets can stand.

It is true that at the present time there is no shortage of applicants for the new houses, but it must be remembered that State subsidised housing was primarily designed to rehouse those in the lower income groups who are unable, for economic reasons, to provide themselves with satisfactory living accommodation. As long as there is a long list of applicants able, and willing, to pay the present rent, it is important that the real needs of those at the lower end of the socio-economic scale should not be forgotten. I regret I was unable to convince the Council of the need for examining this question more closely.

Finally, the fact that the housing application list could be so drastically reduced overnight indicates the need for regular and frequent revision.

The Council is already aware that, as in other areas, many properties are falling into disrepair for want of the owner being able to charge a rental which makes it possible for them to maintain them. So long as the Rent Restriction Acts remain in their present form, it is inevitable that many houses will steadily deteriorate and then be permanently and prematurely lost to the community. Furthermore the Rent Restriction Acts are seriously interfering with the working of important sections of the Housing and Public Health Acts - legislation which is the outcome of 100 years of progress in the care of the health of the public. I would urge the Council, as and when it can at conferences to which it sends delegates, to press for suitable amendments.

## Housing Survey.

The work instituted by my predecessor has progress<sup>ed</sup>/slowly and the current position is dealt with in the Report of the

Sanitary Inspector. This work should be completed as soon as possible so that a true picture based on accurate and detailed information is available for the area as a whole.

Rodent Control.

The Prevention of Damage by Pests Act 1949 came into operation on the 31st March, 1950, and places on this Council the responsibility of keeping their districts free from rats and mice and in particular carrying out periodic inspections to determine the size of the problem. The Council has appointed a part-time Rodent Operator to administer the Act.

Each of the other districts comprising "Area 5" has taken a similar action but I think it unlikely that the Act can be satisfactorily worked on this basis alone and some co-operation will be necessary, at least between these four authorities, such as a pooling of the Rodent Operators for occasional "block" action, particularly in built-up areas.

I would like to express my thanks to Council Members for their co-operation, to Mr. L. Wilson, your former Sanitary Inspector, to Mr. Stribley and other Officers of the Council for their willing assistance and to the staff of my office for considerable help in the preparation of the report.

Yours faithfully,

(signed) A. E. BROWN.

M.B., B.S., D.P.H.

TABLE 1.                    GENERAL STATISTICS.

Area (in acres) .....	3,628
Estimated Resident Population ..	3,509
Rateable Value .....	£19,263
Sum represented by a Penny Rate	£79.

TABLE 2.                    LIVE BIRTHS.

	<u>Males</u>	<u>Females</u>	<u>Total.</u>
Legitimate ..	22	26	48.
Illegitimate ..	3	-	3.
Total	25.	26.	51.

Live Birth Rate per thousand of  
estimated Resident Population ..... 14.0.

TABLE 3.                    STILL BIRTHS.

	<u>Males</u>	<u>Females</u>	<u>Total.</u>
Legitimate ..	1	-	1.
Illegitimate ..	-	-	---
Total	1.	-.	1.

Still Birth Rate per thousand pf  
estimated Resident Population ..... 0.28

TABLE 4.                    DEATHS (All ages).

<u>Males.</u>	<u>Females.</u>	<u>Total.</u>
25.	25.	50.

Crude Death Rate per thousand of  
estimated Resident Population ..... 13.7

TABLE 5.                    INFANT MORTALITY.

No deaths of infants under the age of 1 year  
were recorded during the year.



TABLE 6. CAUSE OF TOTAL DEATHS (Registrar General).

	<u>Males.</u>	<u>Females.</u>	<u>Total.</u>
1. Tuberculosis, respiratory .....	1	-	1.
2. Tuberculosis, other .....	-	-	-
3. Syphilitic disease .....	1	-	1.
4. Diphtheria .....	-	-	-
5. Whooping Cough .....	-	-	-
6. Meningococcal infections .....	-	-	-
7. Acute poliomyelitis .....	-	-	-
8. Measles .....	-	-	-
9. Other infective and parasitic diseases .....	-	1	1.
10. Malignant neoplasm, stomach .....	-	1	1.
11. Malignant neoplasm, lung, bronchus .....	-	-	-
12. Malignant neoplasm, breast .....	-	-	-
13. Malignant neoplasm, uterus .....	-	-	-
14. Other malignant and lymphatic neoplasms ..	3	3	6.
15. Leukaemia, aleukaemia .....	-	-	-
16. Diabetes .....	-	-	-
17. Vascular lesions of nervous system ..	1	8	9.
18. Coronary disease, angina .....	5	3	8.
19. Hypertension with heart disease ..	-	-	-
20. Other heart disease .....	5	1	6.
21. Other circulatory disease .....	2	1	3.
22. Influenza .....	-	1	1.
23. Pneumonia .....	1	-	1.
24. Bronchitis .....	1	1	2.
25. Other diseases of respiratory system ..	1	-	1.
26. Ulcer of stomach and duodenum ...	1	-	1.
27. Gastritis, enteritis & diarrhoea ..	1	-	1.
28. Nephritis and nephrosis .....	-	-	-
29. Hyperplasia of prostate .....	-	-	-
30. Pregnancy, childbirth, abortion ..	-	-	-
31. Congenital malformations .....	-	-	-
32. Other defined and ill-defined diseases ..	2	4	6.
33. Motor vehicle accidents .....	-	-	-
34. All other accidents .....	-	1	1.
35. Suicide .....	-	-	-
36. Homicide and operations of War ..	-	-	-
Totals	25.	25.	50.

TABLE 7.      NOTIFICATIONS OF DEATHS RECEIVED DURING 1950.  
                   (According to age groups).

	<u>Males</u>	<u>Females</u>	<u>Total.</u>
Under 1 year	-	-	-
1 and under 5	-	-	-
5 " " 10	-	-	-
10 " " 20	-	-	-
20 " " 30	-	-	-
30 " " 40	-	2	2.
40 " " 50	2	2	4.
50 " " 60	3	3	6.
60 " " 70	3	5	8.
70 " " 80	7	6	13.
80 " " 90	8	9	17.
90 " " 100	2	-	2.
Total	25.	27.	52.

TABLE 8.      SUMMARY OF BIRTHS AND DEATHS RATES.

	<u>1946</u>	<u>1947</u>	<u>1948</u>	<u>1949</u>	<u>1950</u>
<u>Live Births (per 1000 pop.)</u>					
Diss Urban District .....	11.53	15.92	15.2	10.34	14.0
England and Wales .....	19.1	20.5	17.9	16.7	15.8
<u>Still Births (per 1000 total births).</u>					
Diss Urban District .....	48.78	18.8	18.5	28.0	19.2.
<u>Crude Deaths (per 1000 pop.)</u>					
Diss Urban District .....	13.01	12.36	16.35	16.09	13.7
England and Wales .....	11.5	12.0	10.8	11.7	11.6
<u>Infant Mortality (per 1000 live births).</u>					
Diss Urban District .....	25.64	0.0	56.6	0.0	0.0
England and Wales .....	43.0	41.0	34.0	32.0	29.8

Table 19. BIRTH RATES, DEATH RATES, ANALYSIS OF MORTALITY, MATERNAL MORTALITY AND CASE-RATES FOR CERTAIN INFECTIOUS DISEASES IN THE YEAR 1950. PROVISIONAL FIGURES BASED ON QUARTERLY RETURNS.

	England and Wales	126 County Boroughs and Great Towns including London.	148 Smaller Towns (Resident Population 25,000-50,000 at 1931 Census)	Area 5. Diss and Wymondham, Depwade and Loddon Districts)
Rates per 1,000 Home Population				
<u>Births:</u>				
Live Births	15.8	17.6	16.7	14.75
Still Births	0.37	0.45	0.38	0.30
<u>Deaths:</u>				
All Causes	11.6	12.3	11.6	12.12.
Typhoid and paratyphoid	0.00	0.00	0.00	0.00
Whooping cough	0.01	0.01	0.01	0.00
Diphtheria	0.00	0.00	0.00	0.00
Tuberculosis	0.36	0.42	0.33	0.22
Influenza	0.10	0.09	0.10	0.10
Smallpox	-	-	-	-
Acute poliomyelitis (including polioencephalitis)	0.02	0.02	0.02	0.00
Pneumonia	0.46	0.49	0.45	0.32
<u>Notifications (Corrected)</u>				
Typhoid Fever	0.00	0.00	0.00	0.00
Paratyphoid fever	0.01	0.01	0.01	0.00
Meningococcal infection	0.03	0.03	0.02	0.05
Scarlet fever	1.50	1.56	1.61	1.67
Whooping cough	3.60	3.97	3.15	6.87
Diphtheria	0.02	0.03	0.02	0.00
Erysipelas	0.17	0.19	0.16	0.35
Smallpox	0.00	0.00	-	-
Measles	8.39	8.76	8.36	19.80
Pneumonia	0.70	0.77	0.61	0.97
Acute poliomyelitis (including polioencephalitis) Paralytic	0.13	0.12	0.11	0.25
Non paralytic	0.05	0.05	0.06	0.07
Food Poisoning	0.17	0.16	0.14	0.12
<u>Deaths:</u>				
Rates per 1,000 Live Births				
All causes under 1 year of age	29.8(a)	33.8	29.4	13.56
Enteritis and diarrhoea under 2 years of age	1.9	2.2	1.6	3.3
<u>Notifications (Corrected)</u>				
Puerperal fever and pyrexia	5.81	7.43	4.33	6.64

Maternal Mortality in England and Wales.

International List No. and Cause.	Rates per 1,000 Total (Live and still)Births	Rates per million women aged 15-44
651. Abortion with sepsis	0.09	7
650,652. Other abortion	0.05	4
640-649, 670-678. Complication of pregnancy and delivery	0.54	-
681. Sepsis of childbirth and the puerperium.	0.03	
680,682-689, Other complications of the puerperium	0.15	

(a) Per 1,000 related live births.



TABLE 10. NOTIFICATION OF INFECTIOUS DISEASES (EXCLUDING TUBERCULOSIS) ACCORDING TO AGE GROUPS.

	Under 1	1-2 yrs.	3-4 yrs.	5-9 yrs.	10-14 yrs.	15-24 yrs.	Over 25	Total
Scarlet Fever .....	-	-	-	-	-	-	1	1
Whooping Cough .....	4	1	2	2	-	1	1	11
Measles .....	-	8	17	38	7	-	1	71
Pneumonia .....	-	-	-	-	-	-	4	4
Infective Hepatitis	-	-	-	-	-	-	1	1
Poliomyelitis	-	-	-	-	-	-	-	-
(Paralytic) ..	-	-	-	-	-	-	-	-
" non-paralytic ..	-	-	-	-	1	-	-	1
Total	4	9	19	40	8	1	8	89.

TABLE 11. INCIDENCE OF INFECTIVE DISEASES DURING 1950 (OTHER THAN TUBERCULOSIS).

	Quarters.				TOTAL.
	1st	2nd	3rd	4th	
Scarlet Fever .....	-	1	-	-	1
Whooping Cough .....	-	1	5	5	11
Measles .....	50	2	18	1	71
Pneumonia .....	1	3	-	-	4
Infective Hepatitis .	1	-	-	-	1
Poliomyelitis (Non- paralytic) ..	-	-	1	-	1
Total	52	7	24	6	89

TABLE 12. TUBERCULOSIS (DETAILS OF NEW CASES DURING 1950).

Age Period.	Pulmonary		Non-Pulmonary.	
	M.	F.	M.	F.
0-4	-	-	-	-
5-14	-	-	1	2
15-24	1	-	-	-
25-34	-	-	-	-
35-44	-	1	-	-
45-54	-	-	-	-
55-64	-	-	-	-
65	-	-	-	-
Total	1	1	1	2

TABLE 13.      TUBERCULOSIS (Number of Cases on T.B. Register end 1950.)

	<u>Males.</u>	<u>Females.</u>	<u>Total.</u>
Pulmonary .....	11.	7.	18.
Non-pulmonary ...	2.	3.	5.
Total	13.	10.	23.

TABLE 14.      TUBERCULOSIS (NEW CASES NOTIFIED DURING LAST 5 YEARS).

	1946	1947	1948	1949	1950.
Total	3	1	3	4	5.

TABLE 15.      DIPHTHERIA IMMUNISATION SCHEME.

The following table shows the immunisation state of the children in Area No.5, comprising Diss and Wymondham Urban Districts and Depwade and Loddon Rural Districts for the year ended 31st December, 1950.

	<u>Under School Age</u>	<u>School Age.</u>	<u>Total.</u>
Numbers Immunised	1,450	4,625	6,075
Estimated Population	3,274	5,905	9,179
Percentage Immunised	44.2	78.3	66.1.

TABLE 16.      VACCINATION AGAINST SMALLPOX.

The state of vaccination of children born during 1949 & 1950 resident in the District and in Area 5, comprising Diss and Wymondham Urban Districts and Depwade and Loddon Rural Districts is shown in the following table.

	<u>Diss U.D.</u>		<u>Area 5.</u>	
	<u>1949.</u>	<u>1950.</u>	<u>1949.</u>	<u>1950.</u>
Number of live births registered ...	35.	51.	616.	590.
Number of vaccinations recorded .....	19.	28.	340.	280.
Percentage vaccinated	54.2	54.9	55.2	47.4

TABLE 17.      DEATHS DUE TO CANCER.

	1946	1947	1948	1949	1950.
Number of deaths ..	4	4	13	13	7
Percentage of total deaths	9	9.5	23.2	20.3	14

ANNUAL REPORT ON THE SANITARY CONDITION  
OF THE  
URBAN DISTRICT OF DISS.

1 9 5 0.

SANITARY INSPECTION.

During the year ending 31st December, 1950, a total of 2,391 visits and inspections have been made in connection with Public Health Administration, and are summarised as follows:-

Sanitary Inspection.

Water Supply .....	31.
Drainage .....	190.
Factories .....	34.
Vans used for Human Habitation ..	9.
Rats and Mice .....	64.
Shop Acts .....	25.
Markets .....	42.
Petroleum Acts .....	4.
Housing .....	314.
Infectious Diseases .....	68.
Public Cleansing .....	301.
Refuse Collection - Dustbins ..	9.
Visits with M.O.H. ....	30.
Miscellaneous .....	190.
Total	<u>1311.</u>

Food Inspection.

Regional Slaughterhouse .....	557.
Butchers Shops .....	36.
Fishmongers .....	5.
Groccers .....	31.
Bakehouses .....	21.
Fried Fish Shops .....	7.
Ice Cream premises .....	29.
Restaurants and Cafes .....	13.
Street Vendors .....	347.
Miscellaneous .....	34.
Total	<u>1080.</u>

Number of Complaints received & recorded .. 65.  
Number of Nuisances abated ..... 35.

Notices Served.

Public Health Act 1936, sec.93 .. 1 (nuisance  
abatement).  
Public Health Act 1936, sec.75 .. 7 (re Dustbins).  
  
Legal proceedings ..... Nil.

HOUSING.

During the year 15 houses were repaired by informal action under the Public Health and Housing Act, 1936, and Demolition Orders were made to 3 dwellings.



At the end of this year 3 known cases of overcrowding were in existence, there being improper separation of the sexes in each instance. Only 1 case was reported and 1 abated.

New accommodation constructed during the year was 22 Council Houses, 6 privately owned dwellings and 1 flat, the 100th<sup>Postwar</sup> Council House being in this number.

The temporary accommodation at Mere Manor is gradually being relinquished by families and only 9 remain in occupation.

Housing Survey progress has not been too good during the year due to pressure of other work. To date, 311 houses have been inspected and recorded in the categories as shown in the Rural Housing Survey.

An analysis is as follows:-

Cat.1	Fit in all respects .....	2.
Cat.2	Minor repairs necessary .....	27.
Cat.3	Major repairs necessary .....	200.
Cat.5	Unfit for human habitation , ,	82.
Total		<u>311.</u>

#### INFECTIOUS DISEASE AND DISINFECTION.

During the year 66 visits/inspections were made in connection with infectious disease, being in most instances on notification from the District Medical Officer of Health. "Terminal Disinfection" was carried out to 1 house on account of Tuberculosis.

#### CONSERVANCY.

Conservancy which includes the emptying and cleansing of pail closets, privy vaults and cesspools is carried out under the direction and supervision of the Sanitary Inspector. Approximately 4 days a week are necessary to complete this work using a horse drawn tumbler cart, the horse being hired from Mr.A.F.Harvey, Sturgeons Farm, Roydon, at a charge of 15/- a day.

Eight pails in Roydon (Depwade R.D.) are emptied weekly at an annual fee.

#### Particulars of work done.

Pail Closets - emptied weekly ...	301.
Privy Vaults .....	53.
Cesspools .....	16.

The cost of the Conservancy Services is nearly £400 per year. The present method of emptying pails and vaults is very unsatisfactory and insanitary. Additional equipment would be necessary to put this service on a satisfactory basis. The ideal of course is for every property to be connected to the sewer, but this will not be achieved for several years to come.

As a result of the highly successful experimental emptying of 2 cesspools in the Urban District using Depwade's Cesspools Emptier, the Council resolved that this method be used for emptying all cesspools in the future.

## REFUSE COLLECTION AND DISPOSAL.

The cleansing services are under the direction and supervision of the Sanitary Inspector.

A new Fordson Thames Refuse Collector has been ordered at a cost of £688 which it is hoped to put into operation before the end of the current year. This should maintain and improve this vital and ever expanding service.

Two men and one loader/driver are fully employed on refuse collection and disposal. These men are responsible for tip maintenance and also for Salvage Collection. \* It should be noted that Refuse Disposal is not merely a matter of tipping refuse into a hole. As far as possible the Ministry of Health's recommendations for Controlled Tipping are carried out. The refuse tips are situated on land in Palgrave (Suffolk), rented at an annual cost of £15. The tip fires have now burned themselves out.

During most of the year a weekly collection of refuse has been maintained and this is sufficient to meet all the needs of the town. A large number of householders in Diss misuse their dustbins. All clean paper and cardboard is valuable as salvage; potato peelings, cabbage leaves, tea leaves etc., would be better burned. Garden refuse must not be put into bins.

The poor quality of the coal supplied to Diss is reflected in the greatly increased weight of refuse collected during the winter months. A trial weight of a week's collection of refuse early in November (this was quite a mild dry week) produced a total of 18 tons 9 cwt. 2 qrs. 14 lbs. This weight will be considerably increased during the winter months and not greatly decreased during the summer months. Taking this weight as a weekly average it will be seen that nearly 950 tons of refuse are disposed of annually, which works out at roughly £1. 1. 0d. per ton for collection and disposal.

The collection of refuse has been greatly extended during the past two years and now covers the whole of the Urban District with the exception of part of The Heywood which is essentially rural in character. This can be seen more clearly from figures - in 1947 the number of dustbins emptied weekly was 697, the present number is 1191. Smaller increases will occur annually as new houses are built.

The Council's scheme whereby dustbins can be hired at an annual charge of 5/- is working successfully and smoothly, and has been of great assistance to your Inspector in ensuring that every house has proper and hygienic storage for domestic refuse. Fiftyseven bins have been provided under this scheme.

Number of bins emptied weekly ..... 1191.  
Number of new bins provided during year 15.

\* Although the above statement is true as for 1950, circumstances have changed at the time of publishing, which will be fully described in a later report.

## SALVAGE.

It has been found possible to re-start the collection of waste paper on a reduced scale. Shops and business premises now have a regular collection once every three weeks: houses are dealt with in the course of normal refuse collections. Paper collected is not baled but is put in sacks which are supplied by the Waste Paper Merchants. The price for waste paper jumped from £3 a ton in April to £5 a ton in July.



It seems that there is now an acute shortage of waste paper which is ironical when 12 months previously waste paper was unsaleable, and thousands of tons throughout the country were burned. Our stocks were sold for £36. 6. 0. in March this year but they were worth about £70 at the time of collection.

The weights and value of the various materials salvaged and sold during 1950 are:-

	Tons	Cwts	Qrs.	£.	s.	d.
Paper & Cardboard (from 1949)	9	1	2	36.	6.	0.
Paper & Cardboard (1950)	13	8	3	58.	2.	9.
Miscellaneous				4.	5.	0.
				<hr/>		
Total	22	10	1	£ 98.	13.	9.
				<hr/>		

PETROLEUM ACTS.

Your Sanitary Inspector is also responsible for the administration of the Petroleum Acts which are mainly concerned with the storage of Petroleum Spirit and the licensing of such stores. 26 licences to store Petroleum Spirit are held in the Urban District providing a storage capacity of more than 73,000 gallons. Licensing fees amount to some £22 annually.

1 new licence was granted during the year, the tank being installed under the supervision of your Inspector.

PEST CONTROL.

The Prevention of Damage by Pests Act came into force on the 1st April this year and arrangements have been made to employ an Operator on a part-time/hourly basis. This Act repeals the Rats and Mice (Destruction) Act, 1919. Section 2 states:-

- (1) It shall be the duty of every Local Authority to take such steps as may be necessary to secure as far as practicable that their district is kept free from Rats and Mice, and in particular
  - (a) from time to time to carry out such inspections as may be necessary for the purpose aforesaid.
  - (b) to destroy Rats and Mice on land of which they are the occupier and otherwise to keep such land so far as practicable free from Rats and Mice.
  - (c) to enforce the duties of owners and occupiers of land under the following provisions of this Part of the Act, and to carry out such operations as are authorised by these provisions.
- (2) Every Local Authority shall keep such records and make such reports relating to their functions under this Part of the Act as may be required by any directions given by the Minister (of Agriculture and Fisheries) thereunder.

The following Council properties have received treatment during the year.

(1) Refuse Tips	2.
(2) Public Conveniences	1.
(3) Stores Yard & Stables, Chapel Street, . . .	1.
(4) Council Houses	3.
(5) Housing Site	2.
(6) Victoria Road Depot	1.



Operators of the Ministry of Agriculture and Fisheries have treated the Slaughterhouse and Lairages twice.

Other premises treated during the year:-

Private Houses .....	23.
Licensed Premises .....	5.
Shops .....	4.
Other premises .....	10.

No. of visits in connection with Rates and Mice - 64.

#### SHOPS ACT, 1934.

No. of Shops and Stores registered .....	85.
No. of inspections during the year .....	25.

#### FACTORIES ACT, 1937.

##### 1. Inspections.

<u>Premises.</u>	<u>Number,</u>	<u>Inspections.</u>
Factories with mechanical power .....	38.	21.
Factories without mechanical power ..	9.	5.
Other premises under the Act .....	4.	8.
	<u>51.</u>	<u>34.</u>

##### 2. Defects Found.

<u>Sanitary Conveniences.</u>	<u>Number Found.</u>	<u>Remedied.</u>
Dirty,	1.	1.
Deficient,	3.	3.
	<u>4.</u>	<u>4.</u>

One Certificate of Adequate Means of Escape in Case of Fire has been granted during the year.

#### WATER SUPPLY.

During the year 6 samples of water were submitted for bacteriological analysis and which were reported as follows:-

Satisfactory .....	1.
Unsatisfactory .....	5.

As a result, and in connection with above, 3 dwellings were provided with a piped supply from the Council's main.

#### INSPECTION OF FOOD.

MEAT. Diss is a slaughtering centre under the Memoranda and Orders of the Ministries of Food and Health, supplying a wide area besides the town itself and a population of some 32,000. Meat Inspection is carried out solely by the Sanitary Inspector of the Diss Urban District Council.

##### Notes.

During the year many improvements have been carried out. A Water Closet has been provided in lieu of a pail closet. A Wash Basin with a Gas Heater for hot water has been installed. The yard has been concreted and various repairs (including painting) have been made to the buildings. Condemned meat is removed every other day, and all manure is removed weekly.

No. of visits of inspection to the Slaughterhouse - 557.

SLAUGHTERING.

	<u>Cattle.</u>	<u>Calves.</u>	<u>Sheep.</u>	<u>Pigs.</u>
General	1327	954.	2011	140
Casualties	123	40.	8	175
Private	-	-	-	45
	1450	994.	2019	360.

Of the 1450 Cattle slaughtered there were:-

647 Steers  
500 Heifers  
49 Cow/Heifers  
224 Cows  
30 Bulls.

CONDEMNATIONS. - Whole Carcasses.

Tuberculosis only	17	-	-	-
All disease (except T.B.)	8	4	1	15
	25	4	1	15

CONDEMNATIONS - Part Carcasses.

Tuberculosis only	7	1	-	18
All Diseases (except T.B.)	39	4	3	17
	46	5	3	35

WEIGHTS OF MEAT CONDEMNED.

Meat (Tuberculosis)	5 Tons	6 Cwts	2 Qrs	1 lbs.
Meat (Other Causes)	2 "	14 "	3 "	2 "
Offal (Tuberculosis)	1 "	15 "	3 "	0 "
Offal (Other Causes)	-	19 "	2 "	22 "
Liver (Distomatosis)	1 "	19 "	1 "	8 "
	12 Tons	16 Cwts	0 Qrs	5 lbs.

Notes:

Losses of Meat, particularly from Tuberculosis are a disturbing feature. Is enough being done to reduce the incidence of disease amongst home bred animals? The community can ill-afford such losses particularly while meat remains rationed.

It is interesting to note the wide area from which Diss draws its supplies: Cattle and/or Sheep have come from ~~Northampton~~ Ireland, Tavistock, Hawes, Darlington, Daventry, Market Harborough, Rugby, Northampton, Hertford, King's Lynn, East Dereham, St.Ives, Watton, Dunstable, Burnham Market, in addition to the Diss Markets.

One Cow was slaughtered under the Tuberculosis Order of 1938, the forequarters being condemned.

Only one case of Cysticercus Bovis has been discovered during the year.





SUMMARY OF MEDICAL SERVICES AVAILABLE  
IN AREA NO. 5.

For the information and guidance of Council Members, a summary of the Medical Services available to the No. 5 Area (comprising Depwade and Loddon Rural Districts and Wymondham and Diss Urban Districts) under the National Health Service Acts, is given below.

The National Health Service Act came into operation on 5th. July, 1948, and is designed to provide a comprehensive Health service for the whole population. Only the briefest summary of its provision will be given here. Hospital and specialist services are provided in the area by the Cambridge Regional Hospital Board. The only Institute in No.5 area under the direction of the Board is the Mental Deficiency Institute at Heckingham.

Health Service provided by the Norfolk County Council under Part III of the Act

Section 22 Care of Mother and Young Children

Ante-natal and post-natal clinics have not been established but examinations are carried out by general medical practitioners acting as agents for the Norfolk County Council. Cases requiring a second opinion are referred to specialist obstetricians at the Norwich and Yarmouth Hospitals. Special equipment for premature babies is held in central depots and is available on loan for use in the patients' homes.

Infant Welfare Centres are held monthly at Diss, Loddon, Long Stratton and Wymondham with a Medical Officer and a Health Visitor in attendance. Extra nourishment, in the form of medicaments, when considered advisable, is issued free. Baby foods are also available. Diphtheria immunisation and vaccination against small pox is carried out by the Medical Officer on request.

Village Infant Welfare centres have also been established throughout the Area. These are listed below and are attended by the District Nurse. Sessions are held monthly and a supply of Welfare foods and medicaments is available where required. A Medical Officer is not normally in attendance.

Alpington	Earsham	Thurlton
Bressingham	Ellingham	Topcroft
Brockdish	Gillingham	Winfarthing
Brooke	Hales	Woodton
Bunwell	Langley	
Denton	Spooner Row	
Ditchingham	Tacolneston	

At the time of this report the centre at Ditchingham has been discontinued and a new one established at Hales.

In addition, infant weighing facilities are available to mothers living in those parishes not covered by the above centres. These weighing centres are established at :

Burgh St. Peter	Haddiscoe	Scole
Dickleburgh	Hempnall	Tasburgh
Fornsett St. Peter	Pulham Market	Tivetshall

Dental treatment for infants and pre-school children, and expectant mothers, already referred to in this report, is provided where possible, by the School Dental Officer.

Sections 23, 24 and 25. Midwifery Services. Heath Visiting and Home Nursing

There is a total of 19 district nurse midwives in the Area, available for domiciliary confinements.

Infant Health visiting is carried out as far as possible by qualified Health Visitors but owing to the shortage these duties are otherwise combined with those of the district nurses who are also required to undertake home nursing. There is no special provision for a night nursing service.

#### Section 26. Vaccination against Smallpox and Diphtheria Immunisation

These services are normally carried out by the medical practitioners, but as already stated are available at Infant Welfare Centres. There is no charge to the parents.

Diphtheria Immunisation sessions are also arranged at schools throughout the area and parents are urged to give their consent both for primary and reinforcing injections, and is carried out by the local medical practitioners.

The County Council has made arrangements for Registrars of Births and Deaths to issue to all persons registering births leaflets which stress the importance of vaccination and immunisation. This is followed up by a further pamphlet, in the form of a birthday card, which is sent to the home by the Local Health Office when the child reaches the age of one year

#### Section 27. Ambulance Service

Ambulance for the conveyance of patients, other than infectious disease cases are stationed at Attleborough, Diss, Harleston, Beccles and Norwich.

For patients suffering from infectious diseases, an ambulance and a sitting-case car are available at East Dereham Isolation Hospital. In addition, a sitting-case car service also exists for those patients able to travel by car, but who are unable, for medical reasons to travel by public conveyance.

#### Section 28. Prevention of Illness, Car and After-care.

##### A. Tuberculosis

Two Health Visitors are available in the County who are engaged on after-care work and prevention and they also attend session at the Chest Clinic. Shelters, bedding and other equipment is supplied when considered advisable as also is extra nourishment in suitable cases.

##### B. Mental Health

After-care visits are made where advisable by the two Local Welfare Officers and a Psychiatrist Social Worker. These officers have various other duties particularly under Section 51 mentioned below.

##### C. Provision of Nursing Equipment

Twelve British Red Cross Society and two St. John Ambulance Brigade Medical Loan Depots have been established in the area and these are listed below. Sick-room equipment and other items such as wheel-chairs may be obtained on loan by applications preferably supported by a doctor or district nurse. The Society or Brigade is reimbursed by the County Council and there is no charge to the patient.

<u>Red Cross</u>	Harleston Tacolnston & Ashwellthorpe Ashby Hempnall	Long Stratton Pulham Market Geldeston Bergh Apton	Diss Raveningham Loddon Wymondham
<u>St. John.</u>	Diss	Winfarthing	



## Section 29. Domestic Help

The Home Help Service administered by the Norfolk County Council provides assistance where domiciliary confinement, children without a mother, sickness, blindness, old age and infirmity or mental deficiency render this necessary. This is an extremely valuable service which, where the means of the family justify it, is provided at a reduced cost or even free. The Home Helps are solely concerned with helping to run the house, cleaning it, preparing meals, caring for children, but nursing duties are outside their province.

It is not at present possible to place a Home Help in a "problem" homes where the visual education she would provide could be expected to lead to a higher standard of housewifery in selected cases.

Although there are approximately 40 Home Helps available in the area, it must be emphasised that there are districts which are not covered.

## Section 51. Mental Health Service

The National Health Service Act makes the major local authorities responsible for initial proceedings under the Lunacy and Mental Deficiency Acts and for this purpose as well as the care and after-care of patients suffering from mental illness, two local Welfare Officers - designated Duly Authorised Officers - cover the No. 5 Health Area. The Welfare Office is at "Willowdene", Long Stratton, telephone Long Stratton 220.

An Occupation Centre has been established at Sprowston for suitable ineducable children who have been notified under Section 57 (3) of the Education Act, 1944, and it is hoped to establish a centre at Diss for children in that District. A Home Teacher visits those children unable to attend.

## Education Act 1944

All school children other than those attending private schools are medically examined periodically and parents are invited to attend these consultations. Treatment is provided by the County Council for certain cases of defect, but in general is arranged through the family doctor.

## National Assistance Act (Section 29)

Arrangements have been made by the County Council for advice and assistance to be given to blind, deaf, dumb or other seriously disabled persons. Details can be obtained either from the Local Health Office, "Willowdene" Long Stratton, or from the County Medical Officer direct.

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